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MCNETT & HENRY LLP**  
PATENT & TRADEMARK ATTORNEYS

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**FACSIMILE TRANSMITTAL SHEET**

TO:	U.S. Patent and Trademark Office	FROM:	Douglas G. Gallagher
FAX NUMBER:	571.273.8300	DATE:	January 25, 2006
YOUR REFERENCE NUMBER:	Serial No.: 10/648,057	TOTAL NO. OF PAGES INCLUDING COVER:	8
	Inventor: Scott Haisley	SENDER'S REFERENCE NUMBER:	34062-3
	Filing Date: August 26, 2003	RE:	BOWLING BALL HOLE INSERT
	Examiner/Group Art: William M. Pierce/3711		

☐ URGENT ☐ FOR REVIEW ☐ PLEASE COMMENT ☐ PLEASE REPLY ☐ PLEASE RECYCLE

## NOTES/COMMENTS:

Attached please find:

<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Response to Missing Parts/Incomplete Application	<input type="checkbox"/> After Allowance communication to Group
<input checked="" type="checkbox"/> Credit Card Form PTO-2038	<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Declaration/Power of Attorney	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input checked="" type="checkbox"/> After Final	<input type="checkbox"/> Drawings	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Incl Affidavits/declaration(s)	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Petition	<input type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Petition to Convert to a Provisional Application	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> CD, Number of CD(s)	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	
<input type="checkbox"/> Terminal Disclaimer	<input type="checkbox"/> Request for Refund	

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382348\_1.doc: DGG/cjw:34062-3

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re patent application of:	)	Before the Examiner
	)	
Scott Haisley	)	William M. Pierce
	)	
Serial No. 10/648,057	)	Group Art Unit
(Confirmation No. 2955)	)	3711
	)	
Filed: August 26, 2003	)	
	)	January 25, 2006
BOWLING BALL HOLE INSERT	)	

RESPONSE AFTER FINAL OFFICE ACTION

Mail Stop AF  
Honorable Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

In response to the Final Office Action dated July 27, 2005, the interview on October 12, 2005 and the Advisory Action of November 14, 2005, Applicant respectfully requests consideration of the accompanying amendments and remarks. A three-month extension of time is hereby requested up to and including January 27, 2006. A credit card payment form with the requisite fee in the amount of \$510 for a small entity is herby enclosed. Please charge any additional fees which may be due to Deposit Account No. 23-3030, but do not include any payment of issue fees that are or may become due.

## CERTIFICATE OF FACSIMILE

I hereby certify that this correspondence is being directed  
to the Commissioner of Patents via facsimile to the  
Examiner of record at 571-273-8300 on  
January 25, 2006

Douglas G. Gallagher

Name of Registered Representative



Signature

January 25, 2006

Date of Signature

Response After Final Office Action  
Serial No. 10/648,057  
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WEMMH PTO/SS/17 (02/04)

Approved for use through 07/31/2006, OMB 0651-0032  
U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).  <h2 style="text-align: center;">FEE TRANSMITTAL</h2> <h3 style="text-align: center;">For FY 2005</h3>		<b>Complete if Known</b>	
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Application Number: 10/648,057	
<b>TOTAL AMOUNT OF PAYMENT</b> (\$) 510.00		Filing Date: August 26, 2003	
<b>METHOD OF PAYMENT</b> (check all that apply)		First Named Inventor: Scott Haisley	
<input type="checkbox"/> Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____		Examiner Name: William M. Pierce	
<input checked="" type="checkbox"/> Deposit Account    Deposit Account number: 23-3030    Deposit Account Name: Woodard, Emhardt, Moriarty, McNeft & Henry LLP For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)		Art Unit: 3711	
<input type="checkbox"/> Charge fee(s) indicated below		Attorney Docket No.: 34062-3	
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17		<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee	
<input type="checkbox"/> Credit any overpayments.		<input checked="" type="checkbox"/> Credit any overpayments.	

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### 1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Small Entity Fee (\$)	Small Entity Fee (\$)	Small Entity Fee (\$)	Small Entity Fee (\$)	Small Entity Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

### 2. EXCESS CLAIM FEES

Fee Description	Small Entity Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180

<b>Total Claims</b>	<b>Extra Claims</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>	<b>Multiple Dependent Claims</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>
-20 or HP	=	x	=	Fee (\$)	Fee Paid (\$)	
HP = highest number of total claims paid for, if greater than 20						
<b>Independent Claims</b>	<b>Extra Claims</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>			
-3 or HP	=	x	=			
HP = highest number of independent claims paid for, if greater than 3						

### 3. APPLICATION SIZE FEE


If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 C.F.R. 1.16(s).

<b>Total Sheets</b>	<b>Extra Sheets</b>	<b>Number of each additional 50 or fraction thereof</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>
-100	=	/50	= (round up to a whole number)	x

### 4. OTHER FEE(S)

<b>Non-English Specification, \$130 fee (no small entity discount)</b>	<b>Fee Paid (\$)</b>
Other (e.g., late filing surcharge): 3 mo. Extension of time.	
	510.00

SUBMITTED BY:

Signature: 	Registration No.: 57,783	Telephone: (317) 634-3456
Name (Print/Type): Douglas G. Gallagher	Date: January 25, 2006	

## CERTIFICATE OF MAILING OR TRANSMISSION

I hereby certify that this correspondence is being facsimile transmitted to the U.S. Patent and Trademark Office at 571-273-8300 on the date listed below:

Name (Print/Type): Douglas G. Gallagher	Date: 01/26/2006	01/26/2006 MBINAS 00000016 10648057
Signature: 	Date: January 25, 2006	510.00 OP

382386

WEMMH #317053 (Rev. 7/05)